

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

REV. 11/90

IN UNITED STATES
IN THE CASE OF☐ MAGISTRATE☒ DISTRICT☐ APPEALS COURT☐ OTHER PANEL (Specify below)Goodrich

vs.

Maloney

FOR

District of Massachusetts

AT

Boston

LOCATION NUMBER

DOCKET NUMBER

Magistrate

District Court

Court of Appeals

PERSON REPRESENTED (Show your full name)

Robert P. Goodrich

CHARGE/OFFENSE (describe it applicable & check box →)

☒ Felony☐ MisdemeanorArmed Robbery
&
Habitual Criminal

- 1 Defendant Adult
- 2 Defendant Juvenile
- 3 Appellant
- 4 Probation Violator
- 5 ☐ Parole Violator
- 6 ☒ Habeas Petitioner
- 7 ☐ 2253 Petitioner
- 8 Material Witness
- 9 Other (Specify):

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY**EMPLOY-
MENT**Are you now employed? ☐ Yes ☐ No ☐ Am Self Employed

Name and address of employer:

IF YES, how much do you
earn per month? \$ N/A

IF NO, give month and year of last employment

How much did you earn per month \$

If married is your Spouse employed? ☐ Yes ☐ NoIF YES, how much does your
Spouse earn per month \$ N/AIf a minor under age 21, what is your Parents or
Guardian's approximate monthly income \$**OTHER
INCOME**Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☐ Yes ☐ No

RECEIVED

N/A

SOURCES

IF YES, GIVE THE AMOUNT
RECEIVED & IDENTIFY \$
THE SOURCES**CASH**Have you any cash on hand or money in savings or checking account? ☐ Yes ☒ No IF YES, state total amount \$**PROP-
ERTY**Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ☐ Yes ☒ No

VALUE

DESCRIPTION

IF YES, GIVE VALUE AND \$
DESCRIBE IT**DEPENDENTS**

MARITAL STATUS

☐ SINGLE☐ MARRIED☐ WIDOWED☒ SEPARATED OR
DIVORCEDTotal
No. of
Dependents

List persons you actually support and your relationship to them

**OBLIGATIONS
& DEBTS****DEBTS &
MONTHLY
BILLS**LIST ALL CREDITORS
INCLUDING BANKS,
LOAN COMPANIES,
CHARGE ACCOUNTS
ETC.APARTMENT
OR HOME

Creditors

N/A

Total Debt

Monthly Payment

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

I certify the above to be correct

WARNING:

A FALSE OR DISHONEST ANSWER TO A QUESTION IN THIS AFFIDAVIT MAY BE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH.